## STATE OF WEST VIRGINIA

## Office of the State Fire Marshal 1207 Quarrier St, 2nd Floor Charleston, WV 25301

Phone (304) 558-2191 - Fax (304) 558-2537 - www.wvfiremarshal.org

## **APPLICATION FOR PYROTECHNIC EXAMINATION 2009**

Please complete the application form, submit it along with the testing fee of \$40.00 to the State Fire Marshal and you shall obtain a letter of confirmation for your testing date and location. Once you pass the exam you qualify to obtain your license, which carries an annual fee of \$20.00.

Type of License	indoor pyrotechnics outdoor pyrotechnics				
<b>Applicant Name</b>					
Address			City, State & Zip		
<b>Home Phone</b>	( )	·	Work Phone	( )	
Soc.Sec.No.			Date of Birth		
<b>Drivers License</b>	No.:		State of Issue		
Answer any and all of the following questions: US Citizen yes no  If not state nationality:					
Are you addicted to narcotics, intoxicants or similar drugs?			yes no		
Have you ever been refused a Pyrotechnic license in any state?			yes no		
Have you ever been convicted of a felony ?			yes no		
Are you currently under indictment for a felony?			yes no		
How many years / months have you had experience in handling fireworks ?					
Please indicate at least one previous employer as a reference:					
Current employer:					

Examinations start at 9 am / check in approx. 30 min 8:00am/please check in 30 minutes earlier. Please c 1 <sup>st</sup> 2 <sup>nd</sup>	ircle location, write in 1 <sup>st</sup> and 2 <sup>nd</sup> choice	vill start at e dates.
Charleston – Civic Center – 2009 O FEB 24 O M Clarksburg – United Technical Center – 2009		O SEPT 23
Union Hall #596 - 2009 O Feb 9  Martinsburg – James Rumsey Vocational School – 2	O July 13 O Oct 5 009 O FEB 2 O MAY 4 O AUG 3	O DEC 7
Wheeling – Local 141 Union Hall – 2009 O Mar 24	O May 11 O AUG 10 O Nov 2	
PLEASE GIVE FIVE DIFFERENT SHOOTS THAT YOU	J HAVE ASSISTED WITH:	
1	DATE:	
2	DATE:	<del></del>
3	DATE:	
4	_ DATE:	
5	DATE:	
I herewith certify that I am 21 years of age and have rea concerning fireworks display, and will comply with the ladisplays (list attached), and all information contained in the content of the content	ws as stated. I also certify that I have assi	sted on at least 5
Applicant Signature:		
For office use only: Application approved	disapproved by	Date:

FORM: FM2004EXP008